

**UNITED STATES PATENT APPLICATION
COMBINED DECLARATION AND POWER OF ATTORNEY**

As a below named inventor I hereby declare that: my residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: DEFLECTABLE MEDICAL THERAPY DELIVERY DEVICE HAVING COMMON LUMEN PROFILE, the specification of which:

☐ is attached hereto

☒ was filed on September 05, 2003 under application serial no. 10/656,750, which I have reviewed and for which I solicit a United States patent.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby appoint the attorney(s) and/or agent(s) associated with Customer No. 27581 to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

John W. Albrecht
Stephen W. Bauer
Elisabeth L. Belden
Thomas G. Berry
Keith R. Campbell
Daniel G. Chapik
Kenneth J. Collier

Reg. No. 40,481
Reg. No. 32,192
Reg. No. 50,751
Reg. No. 31,736
Reg. No. 46,597
Reg. No. 43,424
Reg. No. 34,982

Curtis D. Kinghorn
Daniel W. Latham
Paul H. McDowall
Michael C. Soldner
Girma Wolde-Michael
Thomas F. Woods

Reg. No. 33,926
Reg. No. 30,401
Reg. No. 34,873
Reg. No. 41,455
Reg. No. 36,724
Reg. No. 36,726

Please direct all correspondence in this case to: Carol F. Barry, Customer No. 27581.

DECLARATION AND POWER OF ATTORNEY

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

2	Full Name of Inventor	FIRST NAME JOHNSON	MIDDLE INITIAL E.	LAST NAME GOODE
0	Residence & Citizenship	CITY <i>Austin</i> MAPLE GROVE	STATE OR FOREIGN COUNTRY MINNESOTA <i>Texas</i>	COUNTRY of CITIZENSHIP US
1	Post Office Address	POST OFFICE ADDRESS <i>10559 Indigo Broom Loop</i> 6425 POLARIS LANE NORTH	CITY <i>Austin</i> MAPLE GROVE	STATE/ZIP/COUNTRY <i>Texas 78733</i> MINNESOTA/55314/US
SIGNATURE OF INVENTOR 201: <i>John E. Forde</i>				DATE:

2	Full Name of Inventor	FIRST NAME STANTEN	MIDDLE INITIAL C.	LAST NAME SPEAR
0	Residence & Citizenship	CITY ARDEN HILLS	STATE OR FOREIGN COUNTRY MINNESOTA	COUNTRY of CITIZENSHIP US
2	Post Office Address	POST OFFICE ADDRESS 1752 CHATHAM AVENUE	CITY ARDEN HILLS	STATE/ZIP/COUNTRY MINNESOTA/55112/US
SIGNATURE OF INVENTOR 202:				DATE:

☒ This is the final page of this declaration

DECLARATION AND POWER OF ATTORNEY

Page 2 of 2
P0011367.00

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

2	Full Name of Inventor	FIRST NAME JOHNSON	MIDDLE INITIAL E.	LAST NAME GOODE
0	Residence & Citizenship	CITY MAPLE GROVE	STATE OR FOREIGN COUNTRY MINNESOTA	COUNTRY of CITIZENSHIP US
1		POST OFFICE ADDRESS 6425 POLARIS LANE NORTH	CITY MAPLE GROVE	STATE/ZIP/COUNTRY MINNESOTA/55311/US
SIGNATURE OF INVENTOR 201:				DATE:

2	Full Name of Inventor	FIRST NAME STANTEN	MIDDLE INITIAL C.	LAST NAME SPEAR
0	Residence & Citizenship	CITY ARDEN HILLS	STATE OR FOREIGN COUNTRY MINNESOTA	COUNTRY of CITIZENSHIP US
2		POST OFFICE ADDRESS 1752 CHATHAM AVENUE	CITY ARDEN HILLS	STATE/ZIP/COUNTRY MINNESOTA/55112/US
SIGNATURE OF INVENTOR 202:				DATE:

Stanten C. Spear *January 16, 2008*

☒ This is the final page of this declaration